FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P32498** (8)

1. Corporation Name

THOMSON ADVISORY GROUP INC.

Principal Place of Business	Mailing Address
ONE STATION PLACE 7TH FLOOR STAMFORD CT 06902 US	ONE STATION PLACE 7TH FLOOR STAMFORD CT 06902 US

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business
21 700 NEWPORT CENTER DRIVE
Suite, Apt. #, etc.
22 NEWPORT BEACH, CA 92660
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 700 NEWPORT CENTER DRIVE
Suite, Apt. #, etc.
27 NEWPORT BEACH, CA 92660
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 01/11/1991
3a. Date of Last Report: 02/01/1994
4. FEI Number: 04-3092764 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	VP [X] Change ☐ Addition
NAME	PRINIVILLE, ROBERT, A	1.2 NAME	WIRTHLIN, R. LEE
STREET ADDRESS	THREE BEECHCROFT RD.	1.3 STREET ADDRESS	700 NEWPORT CENTER DRIVE
CITY-ST-ZIP	SHORT HILLS NJ	1.4 CITY-ST-ZIP	NEWPORT BEACH, CA 92660
TITLE	V	2.1 TITLE	SECRETARY [X] Change ☐ Addition
NAME	CHIBOUCAS, DONALD A.	2.2 NAME	SCHOTT, JR., NEWTON B.
STREET ADDRESS	14 GREENLEA LANE	2.3 STREET ADDRESS	21 CHESTER ROAD, UPPER MONTCLAIR, NJ 07043
CITY-ST-ZIP	WESTON CT	2.4 CITY-ST-ZIP	
TITLE	VS	3.1 TITLE	TREASURER [X] Change ☐ Addition
NAME	SCHOTT, NEWTON B., JR.	3.2 NAME	KHANH T. TRAN
STREET ADDRESS	21 CHESTER RD.	3.3 STREET ADDRESS	700 NEWPORT CENTER DRIVE
CITY-ST-ZIP	UPPER MONTCLAIR NJ	3.4 CITY-ST-ZIP	NEWPORT BEACH, CA 92660
TITLE	VT	4.1 TITLE	[X] Change ☐ Addition
NAME	GIRVAN, BRIAN J.	4.2 NAME	
STREET ADDRESS	97 BAY AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	HUNTINGTON NY	4.4 CITY-ST-ZIP	
TITLE	VCD	5.1 TITLE	[X] Change ☐ Addition
NAME	SMITH, IRWIN, F	5.2 NAME	
STREET ADDRESS	ONE STATION PLACE	5.3 STREET ADDRESS	
CITY-ST-ZIP	STAMFORD CT	5.4 CITY-ST-ZIP	
TITLE	DC	6.1 TITLE	DIRECTOR/PRESIDENT [X] Change ☐ Addition
NAME	MILLER, DONALD K.	6.2 NAME	
STREET ADDRESS	40 E. 49TH STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 4/24/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — R. LEE WIRTHLIN, VICE PRESIDENT Date Daytime Phone #

0393978 FP